

Eickmeier, Julia (MR # 02213133)

**Patient Information**

Patient Name	Sex	DOB
Eickmeier, Julia	Female	4/14/1991

PCP and Center

Primary Care Provider	Center
None Specified	SAINT ANTHONY MEDICAL CENTER

OR Surgeon signed by Julius C Bonello, MD at 03/04/11 1043

Author: Julius C Bonello, MD	Service: (none)	Author Type: Physician
Filed: 03/04/11 1043	Note: 03/03/11 1033	
	Time:	

BRIEF POST-OPERATIVE PROCEDURE NOTE
(Full Note Pending)

Date of Procedure: 3/3/2011

Surgeon(s): Surgeon(s) and Role:

- Julius C Bonello, MD - Primary
- David L Crawford, MD - Assisting

Pre-operative Diagnosis: Rectal Prolapse

Post-operative Diagnosis: rectal prolapse

Procedure(s): LAPAROSCOPIC RECTOPEXY - Laparoscopic Anterior Rectopexy

Anesthesia: General

Brief Findings:

MR: 02213133 CSN: 24650636
 Admit: 03/03/2011 Disch: 03/03/2011
 DocID: D2020145

D:03/03/2011 10:38:29
 T:03/03/2011 14:09:57

DATE OF SURGERY: 03/03/11

Eickmeier, Julia (MR # 02213133) Printed by Bethany J Delaval [BJDELAVAL] at 3/7/11 9:05 AM

https://www.osfmlink.org/osfmlink/epiccare/chartreview_report.asp?List=3%2C&ReportFra... 3/7/2011

DATE OF SERVICE: 02/21/2011
PATIENT: JULIA C. BICKMEIER
ACCOUNT NUMBER: 76973
DATE OF BIRTH: 04/14/1991
PHYSICIAN: JULIUS P. BONELLO, M.D.

HISTORY: Julia Bickmeier is a 19-year-old white female who is referred here because of a possible prolapsed rectum. On examination today in the office, the patient was placed on the commode and with straining had just the beginning of a prolapse, although she said that sometimes it comes out about 3 to 4 inches. The patient is a candidate for an anterior rectopexy. The patient understands the planned procedure, risks, complications, and alternatives and is willing to go ahead with the surgery.

PAST HISTORY:

ALLERGIES: None.

CURRENT COMORBIDITIES: Constipation.

PAST SURGICAL HISTORY: Oral surgery only.

CURRENT MEDICATIONS: Prenatal vitamins, laxatives, softeners, and castor oil.

FAMILY HISTORY: Father is 64 with a history of a malignant melanoma. Mother has a history of Epstein-Barr virus. The patient has three siblings all alive and well.

SOCIAL HISTORY: The patient is an unemployed, single female who rarely uses alcohol. She never used tobacco and quit illicit drugs two years ago.

REVIEW OF SYSTEMS: Noncontributory except as mentioned in the HPI.

PHYSICAL EXAMINATION: Height 5'5", weighs 127 pounds. Blood pressure 100/64.

HEENT: Within normal limits.

NECK: The neck is supple, no carotid bruits.

CHEST: Clear.

CARDIOVASCULAR: Exam shows regular rhythm, no murmur, gallops, or rubs.

JULIA C. EICKMEIER
02/21/2011
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ABDOMEN: Soft, benign, nontender.
RECTAL: As above.
EXTREMITIES: Good distal pulses. No peripheral edema.
NEUROLOGICAL: Grossly within normal limits.

IMPRESSION: Prolapsed rectum.

PLAN: Anterior rectopexy.

JULIUS P. BONELLO, M.D.
Associate Professor of Clinical Surgery
University of Illinois College of Medicine at Peoria
Chief, Department of Colon and Rectal Surgery
JPB/llw

cc: Zaid Musaitif, MD

Electronically approved by: Julius Bonello MD Date: 02/25/2011 09:56

Eickmeier, Julia (MR # 02213133)


OSF
 HEALTHCARE SYSTEM

Patient Information

Patient Name	Sex	DOB
Eickmeier, Julia	Female	4/14/1991

PCP and Center

Primary Care Provider	Center
None Specified	SAINT ANTHONY MEDICAL CENTER

OR Surgeon signed by Julius C Bonello, MD at 03/04/11 1043

Author:	Service:	Author Type:
Julius C Bonello, MD	(none)	Physician
Filed: 03/04/11 1043	Note: 03/03/11 1033	
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Eickmeier, Julia (MR # 02213133) Printed by Bethany J Delaval [BJDELAVAL] at 3/7/11 9:06 AM

https://www.osfelink.org/osfelink/epiccare/chartreview_report.asp?List=3%2C&ReportFra... 3/7/2011

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Job #5135148
ngb

Version Date: 03/03/2011 14:09:57
ngb

JULIUS C BONELLO, Admitting Physician

Estimated Blood Loss: ML

Specimens: * No specimens in log *

Complications: * No complications entered in OR log *

Total Operative Time: 2 Hr 17 Min 27 Sec

Disposition: PACU - hemodynamically stable.

Condition: stable

Surgeon: JULIUS C BONELLO, MD, 3/3/2011, 10:33 AM

Electronically signed by Julius C Bonello, MD at 03/04/11 1043

Eickmeier, Julia (MR # 02213133) Printed by Bethany J Delaval [BJDELAVAL] at 3/7/11 9:06 AM



Discharge Summary

Julia Eickmeier

Facility		
Name	Address	Phone
SAINT FRANCIS MEDICAL CENTER	530 NE GLEN OAK AVE Peoria IL 61637	309-655-2000

Attending Provider Information			
Provider	pager	Service	Admission Date
Julius C. Bonello, MD		Surgical	03/03/11
Actual LOS			
0 days			

Allergies as of 3/3/2011
No Known Allergies

Immunizations as of 3/3/2011
No immunizations on file.

Discharge Medications

Disclaimer
Medication details received at your local pharmacy may vary from those listed below.
Consult your local pharmacist or your physician should you have any questions.

Current Discharge Medication List						
START taking these medications						
hydrocodone-acetaminophen 5-325 MG PO TABS	Dose 1-2 Tabs	Details Take 1-2 Tabs by mouth every 4 hours as needed for Pain. Quantity: 40 Tab Refills: 1	AM []	Noon []	PM []	Bedtime []
	Start Date: 3/3/11					

Your To Do List			
Future Appointments: 3/3/2011 11:00 PM	Department: Sfinc Laboratory Services	Dept Phone	Center: Peoria
Future Orders Call MD For: Temperature >101.4 Call MD For: Persistent Nausea and Vomiting Call MD For: Severe Uncontrolled Pain Follow Up: With Doctor 1	Please Complete By		Expires
Questions: Doctor: When: Patient/Parents to call for appointment? Please make appointment prior to discharge No Dressing Needed	Responses: Bonello 3 weeks Yes		

Discharge Instructions
Buy Colace OTC at your Pharmacy; 100 mg. q day

Dr. Bonello's office telephone number: 495-0200

If you are an Adolescent/Adult, follow these instructions:

Influenza Vaccine:

People recommended for vaccination based on their risk of complications from influenza or because they are in close contact with someone at higher risk of influenza complications include:
- Children aged 6 months until their 5th birthday,

- Pregnant women,
- People 50 years of age and older,
- People of any age with certain chronic health conditions (such as asthma, diabetes, or heart disease),
- People who live in nursing homes and other long-term care facilities,
- Household contacts of person at high risk for complications from influenza,
- Household contacts and out of home caregivers of children less than 6 months of age, and Health care workers.

People who should NOT be vaccinated include:

- People who have a severe allergy to chicken eggs,
- People who have had a severe reaction to an influenza vaccination,
- People who have developed Guillain-Barré syndrome within 6 weeks of getting an influenza vaccine,
- Children less than 6 months of age (influenza vaccine is not approved for this age group), and
- People who have a moderate to severe illness with a fever (they should wait until they recover to get vaccinated).

I understand that the Pneumonia Vaccine is recommended for:

- people 65 and older (Usually just one dose in a lifetime. If given before age 65, a second dose in 5-10 years may be recommended)
- people with chronic health conditions (Heart Failure, Cancer, some Lung Diseases, Diabetes, etc.)

I understand:

- Regular activity within my limitations is important for my health.
- Eat a well balanced diet and any specific diets prescribed by your doctor
- Weighing myself daily and reporting a gain of 3 pounds in a day and/or 5 pounds in a week to my doctor is important, unless otherwise directed. (Applies to only patients diagnosed with Heart Failure)
- If I have difficulty breathing I am to contact my doctor or go to the nearest emergency department.
- Keep any follow up appointments recommended by your doctor

I understand I can decrease my risk of future stroke or heart attack by carefully controlling and monitoring any of the risk factors listed below:

- High Blood Pressure (hypertension)
- High Blood Cholesterol (hyperlipidemia)
- Diabetes
- Smoking
- Excessive Alcohol use
- Elicit Drugs, or drugs not prescribed by you doctor

DO NOT SMOKE; if you do smoke, STOP. For information to help you stop smoking, refer to smoking handout or see your doctor.

Written Instructions have been given to the patient/caregiver. Patient/caregiver verbalized understanding.

Printing Report

Report ID
3042740001

Report Name
After Visit Summary

Print
Page

IMPORTANT NOTE: This is a summary and does not contain all possible information about this product. For complete information about this product or your specific health needs, ask your health care professional. Always seek the advice of your health care professional if you have any questions about this product or your medical condition. This information is not intended as individual medical advice and does not substitute for the knowledge and judgment of your health care professional. This information does not contain any assurances that this product is safe, effective, or appropriate for you.

HYDROCODONE/ACETAMINOPHEN - ORAL (hye-droe-KOE-done/a-SEET-a-MIN-oh-fen)

COMMON BRAND NAME(S): Lorcet, Lortab, Norco, Vicodin

USES: This combination medication is used to relieve moderate to severe pain. Hydrocodone is a narcotic pain reliever (opiate-type) that acts on certain centers in the brain to give you pain relief. Acetaminophen is a non-narcotic pain reliever.

OTHER USES: This section contains uses of this drug that are not listed in the approved professional labeling for the drug but that may be prescribed by your health care professional. Use this drug for a condition that is listed in this section only if it has been so prescribed by your health care professional. This medication may also be used to suppress a cough.

HOW TO USE: Take this medication by mouth, as directed by your doctor. You may take this drug with or without food. If you have nausea, you may take this drug with food, although doing so may decrease its effectiveness. Consult your doctor or pharmacist about alternatives for decreasing nausea (e.g., antihistamines, lying down for 1-2 hours with minimal head movement). If you are using the liquid product, measure the medication with a dose-measuring spoon or device to make sure you get the correct dose. Do not use a household spoon. The dosage is based on your medical condition and response to therapy. Pain medications work best in relieving pain before it becomes severe. Once the pain becomes intense, the medication is not as effective in relieving it. Use this medication exactly as prescribed. Do not increase your dose, take it more frequently or use it for a longer period of time than prescribed because this drug can be habit-forming. Also, if used for an extended period of time, do not suddenly stop using this drug without your doctor's approval. When used for an extended period, this medication may not work as well and may require different dosing. Talk with your doctor if this medication stops working well. This medication contains acetaminophen. Do not take more acetaminophen than recommended (see Side Effects section). Inform your doctor if your condition persists or worsens.

SIDE EFFECTS: Nausea, vomiting, constipation, lightheadedness, dizziness, drowsiness, flushing, vision changes, or mental/mood changes may occur. If any of these effects persist or worsen, notify your doctor or pharmacist promptly. Remember that your doctor has prescribed this medication because he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects. Tell your doctor immediately if any of these unlikely but serious side effects occur: slow/irregular breathing, slow/irregular heartbeat, change in the amount of urine. Tell your doctor immediately if any of these highly unlikely but very serious side effects occur: impairment or loss of hearing (especially with high doses for long periods). If you do not have liver problems, the adult maximum dose of acetaminophen is 4 grams per day (4000 milligrams). If you take more than the maximum daily amount, it may cause serious (possibly fatal) liver disease. Seek immediate medical attention if you have any of the following symptoms of liver damage: severe nausea, yellowing eyes or skin, dark urine, stomach pain, extreme fatigue. If you have liver problems, consult your doctor or pharmacist for a safe dosage of this medication. An allergic reaction to this drug is unlikely, but seek immediate medical attention if it occurs. Symptoms of an allergic reaction include: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist. In the US - Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. In Canada - Call your doctor for medical advice about side effects. You may report side effects to Health Canada at 1-866-234-2345.

PRECAUTIONS: Before taking this medication, tell your doctor or pharmacist if you are allergic to it; or to other narcotics (e.g., morphine, codeine); or if you have any other allergies. This medication should not be used if you have certain medical conditions. Before using this medicine, consult your doctor or pharmacist if you have: severe

breathing problems (e.g., respiratory depression, hypercapnia), severe diarrhea (e.g., pseudomembranous colitis, infectious diarrhea due to toxins). Before using this medication, tell your doctor or pharmacist your medical history, especially of: liver disease, kidney disease, difficulty urinating (e.g., enlarged prostate, urethral stricture), alcohol use, drug dependency, heart problems (e.g., slow/irregular heartbeat, very low blood pressure), abdominal/stomach problems (e.g., gallbladder disease), lung disease (e.g., asthma, chronic obstructive pulmonary disease), seizure disorders, serious head injury or brain disease, spinal problems (kyphoscoliosis), low thyroid disease (hypothyroidism), adrenal gland problems (Addison's disease), psychiatric problems (toxic psychosis). This drug may make you dizzy or drowsy; use caution engaging in activities requiring alertness such as driving or using machinery. Avoid alcoholic beverages because they may increase the risk of side effects of this drug. This product contains acetaminophen which may cause liver damage. Daily use of alcohol, especially when combined with acetaminophen, may increase your risk for liver damage. Check with your doctor or pharmacist for more information. To minimize dizziness and lightheadedness, get up slowly when rising from a seated or lying position. Caution is advised when using this drug in the elderly because they may be more sensitive to the side effects of the drug, especially the possible decreased breathing and drowsiness effects. This medication should be used only when clearly needed during pregnancy. It is not recommended for use for long periods or in high doses near the expected delivery date because of the potential for harm to an unborn baby. Discuss the risks and benefits with your doctor. Based on information from related drugs, this drug may pass into breast milk. Due to the potential risk to the infant, consult your doctor before breast-feeding.

DRUG INTERACTIONS: Your doctor or pharmacist may already be aware of any possible drug interactions and may be monitoring you for them. Do not start, stop, or change the dosage of any medicine before checking with them first. This drug should not be used with the following medication because very serious interactions may occur: naltrexone. If you are currently using this medication, tell your doctor or pharmacist before starting this drug. Before using this medication, tell your doctor or pharmacist of all prescription and nonprescription products you may use, especially of: other medications for pain, cimetidine, isoniazid, MAO inhibitors (e.g., furazolidone, linezolid, moclobemide, phenelzine, procarbazine, rasagiline, selegiline, isocarboxazid, tranylecypromine), anti-seizure drugs (e.g., carbamazepine, phenobarbital, phenytoin), anticholinergic drugs/antihistamines (e.g., hydroxyzine, oxybutynin, scopolamine). Also report drugs that cause drowsiness such as: medicine for sleep (e.g., sedatives), tranquilizers, anti-anxiety drugs (e.g., diazepam), psychiatric medicines (e.g., phenothiazines such as chlorpromazine, or tricyclics such as amitriptyline), muscle relaxants, antihistamines that cause drowsiness (e.g., diphenhydramine). Acetaminophen is an ingredient in many nonprescription products and in some combination prescription medications. Read the labels carefully before taking other pain relievers, fever reducers, or cold products to see if they also contain acetaminophen. Consult your pharmacist if you are uncertain if your other prescription or nonprescription products contain acetaminophen. (Also see adult maximum daily dose information in Side Effects section). This document does not contain all possible interactions. Therefore, before using this product, tell your doctor or pharmacist of all the products you use. Keep a list of all your medications with you, and share the list with your doctor and pharmacist.

OVERDOSE: If overdose is suspected, contact your local poison control center or emergency room immediately. US residents can call the US national poison hotline at 1-800-222-1222. Canadian residents should call their local poison control center directly. Symptoms of overdose may include: vomiting, slow breathing, slow heartbeat, cold/clammy skin, unusual sweating, loss of consciousness, severe nausea, yellowing eyes or skin, dark urine, extreme fatigue, stomach pain.

NOTES: Do not share this medication with others. It is against the law. This medication has been prescribed for your current condition only. Do not use it later for another condition unless told to do so by your doctor. A different medication may be necessary in those cases. To prevent constipation, maintain a diet adequate in fiber, drink plenty of water, and exercise. If you become constipated while using this drug, consult your pharmacist for help in selecting a laxative (e.g., stimulant-type).

MISSED DOSE: If you miss a dose, use it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

STORAGE: Store at room temperature between 59 and 86 degrees F (15-30 degrees C) away from light and moisture. Different brands have different storage requirements, so consult your pharmacist for more information. Do not store in the bathroom. Keep all medicines away from children and pets. Do not flush medications down

the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

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IMPORTANT NOTE: This is a summary and does not contain all possible information about this product. For complete information about this product or your specific health needs, ask your health care professional. Always seek the advice of your health care professional if you have any questions about this product or your medical condition. This information is not intended as individual medical advice and does not substitute for the knowledge and judgment of your health care professional. This information does not contain any assurances that this product is safe, effective, or appropriate for you.

DOCUSATE - ORAL (DOCK-you-sate)

COMMON BRAND NAME(S): Col-Rite, Colace, Correctol, Diceto, Dioeze, Doc-Q-Lace, Docucal, Docusoft, DSS, Silace, Surfak

USES: This medication is used to treat occasional constipation. Some medications and conditions can make constipation more likely. Stool softeners such as docusate are often the first method used for preventing and treating this type of constipation. Docusate is often used when straining to have a bowel movement should be avoided (e.g., after a heart attack or surgery). Docusate is a stool softener. It works by increasing the amount of water the stool absorbs in the gut, making the stool softer and easier to pass.

HOW TO USE: Follow all directions on the product package unless otherwise directed by your doctor. If you are uncertain about any of the information, consult your doctor or pharmacist. Take this medication by mouth, usually at bedtime with a full glass (8 ounces or 240 milliliters) of water or juice, or as directed by your doctor. The dosage is based on your medical condition and response to therapy. Decrease your dose or stop taking this medication if you develop diarrhea. If you are using the liquid form of this medication, measure the dose carefully using a special measuring device/spoon. Do not use a household spoon because you may not get the correct dose. If you are using the drops, measure the medication with the dropper provided, or use a dose-measuring spoon or device to make sure you have the correct dose. Mix the syrup, liquid or drops in 4 to 8 ounces of fruit juice, milk or infant formula to prevent throat irritation and mask a bitter taste. Use this medication only when needed. Do not use this product for more than 1 week unless directed by your doctor. Relief is usually seen in 1 to 3 days. Inform your doctor if your condition persists or worsens.

SIDE EFFECTS: Stomach pain, diarrhea, or cramping may occur. Irritated throat (with liquid or syrup forms) may also occur. If any of these effects persist or worsen, notify your doctor or pharmacist promptly. If your doctor has directed you to use this medication, remember that he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects. Tell your doctor immediately if this unlikely but serious side effect occurs: rectal bleeding. A very serious allergic reaction to this drug is unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist. In the US - Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. In Canada - Call your doctor for medical advice about side effects. You may report side effects to Health Canada at 1-866-234-2345.

PRECAUTIONS: Before taking this medication, tell your doctor or pharmacist if you are allergic to it or if you have any other allergies. If you have any of the following health problems, consult your doctor or pharmacist before using this medication: severe abdominal pain, nausea, vomiting, sudden change in bowel habits over the previous 2 weeks. This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your doctor. It is not known if this drug passes into breast milk. Consult your doctor before breast-feeding.

DRUG INTERACTIONS: Your healthcare professionals (e.g., doctor or pharmacist) may already be aware of any possible drug interactions and may be monitoring you for it. Do not start, stop or change the dosage of any medicine before checking with them first. This drug should not be used with the following medication because very serious interactions may occur: mineral oil. If you are currently using this medication, tell your doctor or pharmacist before starting docusate. Before using this medication, tell your doctor or pharmacist of all prescription and nonprescription/herbal products you may use, especially of: aspirin, drugs containing phenolphthalein. This document does not contain all possible interactions. Therefore, before using this product,

tell your doctor or pharmacist of all the products you use. Keep a list of all your medications with you, and share the list with your doctor and pharmacist.

OVERDOSE: If overdose is suspected, contact your local poison control center or emergency room immediately. US residents can call the US national poison hotline at 1-800-222-1222. Canadian residents should call their local poison control center directly.

NOTES: Do not share this medication with others. Constipation can usually be prevented by eating a diet high in fiber, drinking enough fluids and getting regular exercise. Use this medication for temporary relief of constipation only. Do not use this medication for a long period of time to prevent becoming dependent on laxatives.

MISSED DOSE: If you miss a dose, use it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

STORAGE: Store at room temperature at 59-86 degrees F (15-30 degrees C) in a tightly closed container away from light and moisture. Do not store in the bathroom. Keep all medicines away from children and pets. Do not flush medications down the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company for more details about how to safely discard your product.

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Constipation in Adults

Constipation is having fewer than 2 bowel movements per week. Usually, the stools are hard. As we grow older, constipation is more common. If you try to fix constipation with laxatives, the problem may get worse. This is because laxatives taken over a long period of time make the colon muscles weaker. A low fiber diet, not taking in enough fluids, and taking some medications may all make these problems worse.

SOME MEDICATIONS WHICH MAY CAUSE CONSTIPATION ARE:

- Water pills (*diuretics*).
- Calcium channel blockers (a medication used for controlling blood pressure and used for the heart).
- Narcotics (certain pain medications).
- Anticholinergics.
- Anti-inflammatory agents.
- Antacids which contain aluminum.

SOME DISEASES WHICH CONTRIBUTE TO CONSTIPATION ARE:

- Diabetes.
- Parkinson's disease.
- Dementia (the mind is not working properly).
- Strokes.
- Depression.
- Illnesses that cause difficulties with salt and water metabolism.

HOME CARE INSTRUCTIONS

- Constipation is usually best cared for without medications. Increasing dietary fiber and eating more fruits and vegetables is best to manage constipation.
 - Slowly increase fiber intake to 25-38 grams/day. Whole grains, fruits, vegetables, and legumes are good sources of fiber. A Registered Dietitian can further help you incorporate high fiber foods into your diet.
 - Drink at least 8 cups of fluid daily when eating high fiber foods to prevent further constipation.
- A fiber supplement may be added to your diet if you cannot get enough fiber from foods.
- Increasing your activities also helps improve regularity.
- Suppositories, as suggested by your caregiver, will also help stimulate the colon to empty. If you are using antacids, such as aluminum or calcium containing products, which cause constipation, it will be helpful to switch to products containing magnesium if your caregiver has no objections.
- If you have been given an enema today, this is only a temporary measure. It should not be relied on for treatment of longstanding (*chronic*) constipation. If enemas are used long term, they will weaken the colon muscles. This will make constipation worse.
- Stronger measures such as magnesium sulfate should be avoided if possible. This may cause uncontrollable diarrhea. Using magnesium sulfate may not allow you time to make it to the bathroom.

SEEK IMMEDIATE MEDICAL CARE IF:

- There is bright red blood in the stool.
- The constipation stays for more than 4 days.
- There is belly (*abdominal*) or rectal pain along with the constipation.
- You do not seem to be getting better.
- You have any questions or concerns.

MAKE SURE YOU:

- Understand these instructions.

- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

Document Released: 09/15/2005 Document Re-Released: 11/30/2009

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This has been repaired for you by your caregiver using tissue adhesive. Tissue adhesive holds the skin together and allows faster healing. It forms a strong bond on the skin in about a minute and reaches its full strength in about two and one half minutes. Sometimes stitches (absorbable) may need to be used beneath the skin if the wound is deep and needs additional help in being held together.

HOME CARE INSTRUCTIONS

- If you did not receive a tetanus shot today because you did not recall when your last one was given, make sure to check with your follow up or primary caregiver to see if one is needed.

- There is redness, swelling, increasing pain in the wound, or a red line that extends from the wound.
- Pus is coming from wound.
- An unexplained oral temperature above 102° F (38.9° C) develops.
- You notice a foul smell coming from the wound from beneath the adhesive.
- The wound or adhesive breaks open or the edges of the wound come apart.

- ✓ Understand these instructions.
- ✓ Will watch your condition.
- ✓ Will get help right away if you are not doing well or get worse.

Discharge Instructions After Sedation/Anesthesia, Adult

The medicines you received during the procedure or test today can sometimes cause you to be:

- | | |
|---|--|
| <ul style="list-style-type: none"> ➤ Confused. ➤ Dizzy. | <ul style="list-style-type: none"> ➤ Sleepy. ➤ Clumsy. |
|---|--|

HOME CARE INSTRUCTIONS:

Do not engage in any activity that requires you to be alert or coordinated for the next 24 hours. This includes **driving, operating heavy machinery, using power tools, cooking, climbing, or riding a bicycle.**

- No swimming, hot tubs, or baths for the next 24 hours.
- Stay with family, friends, or a caregiver for the next 24 hours.
- Do not make any important decisions in the next 24 hours such as signing contracts, important commitments, or making expensive purchases.
- Do not drink alcohol for 24 hours.
- Avoid solid food if you have *nausea* (feel sick to your stomach) or vomiting.
- Drink plenty of fluids.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Call your caregiver for persistent nausea and/or if you vomit more than once.
- If you cannot reach your caregiver, go to or contact the Emergency Department.

SEEK IMMEDIATE MEDICAL CARE IF:

- You vomit more than once.
- Show strange or unusual behavior, or behave abnormally.
- Fever.
- Difficulty urinating.
- Severe pain.

Document Released: 12/18/2006 Document Re-Released: 03/16/2010
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Laparoscopy, Diagnostic

Laparoscopy is a surgical procedure. It is used to diagnose and treat diseases inside the *abdomen* (belly). It is usually a brief (less than one hour), common, and relatively simple procedure.

The *laparoscope* is a thin, lighted, pencil-sized instrument. It is like a telescope. It is inserted into your abdomen through a small *incision* (cut). Through this instrument, your caregiver can look at the organs inside your body. They can see if there is anything abnormal.

LAPAROSCOPY OVERVIEW

Laparoscopy can be done either in a hospital or out-patient clinic. You may be given a mild sedative to help you relax before the procedure. Once in the operating room, you will be given a general anesthesia. Laparoscopy usually lasts less than an hour. After the procedure, you will be monitored in a recovery area until you are stable and doing well. Once home, it takes two to three days to fully recover.

RISKS AND COMPLICATIONS

Laparoscopy has relatively few risks. Your caregiver will discuss the risks with you before the procedure.

Some problems that can occur following this procedure include:

- ~ Infection. A germ may start growing in one of the wounds. This can usually be treated with antibiotics.
- ~ Bleeding following surgery can be a complication of almost any surgery. Your surgeon takes every precaution to keep this from happening.
- ~ Damage to other organs may occur. If damage to other organs or excessive bleeding should occur, it may be necessary to convert the laparoscopic procedure into an open abdominal procedure. Scarring (adhesions) from previous surgeries or disease may also be a cause to change this procedure to an open abdominal operation.
- ~ Anesthetic side effects.

THE PROCEDURE

Once you are anesthetized, your surgeon inflates your *abdomen* (belly) with a harmless gas (*carbon dioxide*). This makes your organs easier to see. The laparoscope is inserted into your abdomen through a small *incision* (cut). This allows your surgeon to see into the abdomen. Other small instruments also are inserted into the abdomen through other small openings. Many surgeons attach a video camera to the laparoscope to enlarge the view.

During a diagnostic laparoscopy the surgeon may be looking for inflammation, infection or cancer. This procedure allows for a diagnosis and a treatment. Your surgeon may take *biopsies* (tissue samples). Biopsies can help to diagnose or confirm a disease process. The samples are sent to the *pathologist* (a specialist in looking at cells and tissue samples). The pathologist examines them under a microscope.

After the procedure, the gas is released from inside your abdomen. Your incisions are closed with *sutures* (stitches). Because these incisions are small (usually less than one-half inch), there is usually minimal discomfort following the procedure. The recovery time is shortened as long as there are no complications. You may have some mild discomfort in the throat. This is from the tube placed in your throat while you were sleeping. You may have some mild abdominal discomfort. You may also have discomfort from the instrument placement incisions in your abdomen.

You will rest in a recovery room until you are stable and doing well. As long as there are no complications, you may be allowed to go home.

HOME CARE INSTRUCTIONS

- Take all medications as directed.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Resume daily activities as directed.
- Showers are preferred over baths.
- You may resume sexual activities in one week or as directed.
- Do not drive while taking narcotics.
- If biopsies were taken, find out how you are to get your results. The results may be given during the follow up visit. Do not assume tests are normal if you do not hear from your caregiver. It is your responsibility to obtain your results.

SEEK MEDICAL CARE IF:

- There is increasing abdominal pain.
- You develop a new pain in your shoulders in a shoulder strap area.
- You feel lightheaded or faint.
- You have chills or fever.
- You have *purulent* (pus-like) drainage from any of your wounds.
- You are unable to pass gas or have a bowel movement.
- You have nausea or vomiting.

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